

PRACTICAL REMARKS
ON
THE USE
OF THE
SPECULUM

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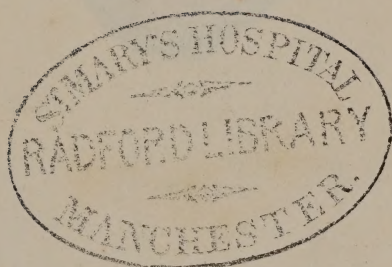
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PRACTICAL REMARKS.



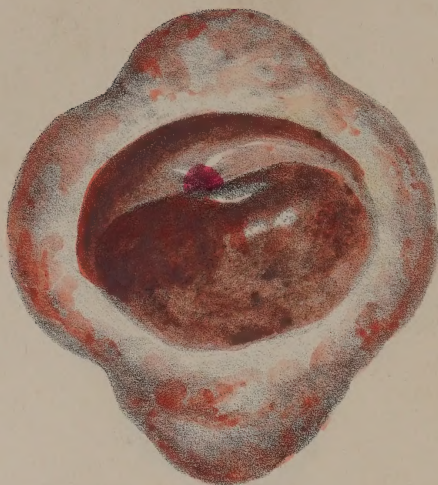
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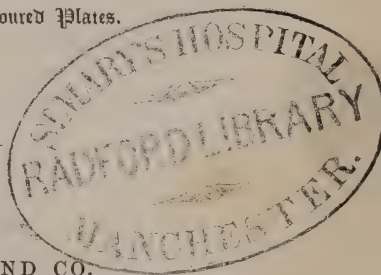


PRACTICAL REMARKS
ON THE USE OF
THE SPECULUM
IN THE TREATMENT OF
DISEASES OF FEMALES:

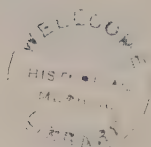
BY
THOMAS R. MITCHELL, M.D.

FELLOW AND LICENTATE OF THE ROYAL COLLEGE OF SURGEONS IN IRELAND,
MASTER OF THE SOUTH EASTERN LYING-IN HOSPITAL, AND LECTURER
ON MIDWIFERY IN THE DUBLIN SCHOOL OF MEDICINE.

Illustrated with Cases and Coloured Plates.



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TO
HIS PRESENT CLASS,
AND
THE PUPILS WHO HAVE ATTENDED AT THE SOUTH EASTERN
LYING-IN HOSPITAL,
DURING THE PERIOD OF HIS MASTERSHIP,
THIS LITTLE TREATISE
IS DEDICATED BY THEIR SINCERE FRIEND,
THE AUTHOR.



P R E F A C E .

HAVING been repeatedly solicited by my pupils to publish a short account of the speculum, in reference to the various cases requiring its application, I have in the following pages put together my notes of the different clinical lectures that I have given on the subject ; in the hope that they may prove useful to the beginner, for whose use only they are compiled.

The cases have been selected from a great number, many of which have been seen under treatment by my pupils. The drawings, although rather highly coloured, are most faithfully executed, and were taken

from nature by Mr. Neilan. Their accuracy and their difficulty of attainment greatly enhance, in my mind, the value of this little treatise.

It is needless to say that my position at the Hospital affords me numerous and ample opportunities for testing the value of remedies, and of fully investigating the various uterine affections which come daily under my notice ; and I may here state that I have rarely found any difficulty in inducing the female to submit to a specular examination.

I am perfectly aware that all the modern works on the diseases of females give most ample directions for the introduction of the speculum ; and that the various applications which are employed are mentioned in different works. Many of these experience has proved the value of, and I have given short formulæ for their preparation ; my object being to present to the pupil a concise view

of our knowledge on the subject, and at the same time to introduce to his notice one or two novel methods of treating uterine disease not generally known.

I think it right here to state that in the preparation of my notes I have consulted the works of Montgomery, Churchill, Astruc, Capuron; Manning, Lee, Bennet, Ashwell, Whitehead, &c. from whose valuable pages I have received much information, which I take this opportunity of acknowledging.

South Eastern Lying-in Hospital,
December, 1848.

PRACTICAL REMARKS,

&c.

I look upon the introduction of the Speculum into general practice, as one of the greatest improvements in the treatment of disease since the discovery of the stethoscope ; and although some may feel inclined to give the palm to the Uterine Sound as the more valuable instrument, I confess that I am not of that opinion.

I would, at the commencement, wish to be understood as deprecating the indiscriminate use of the speculum, as I am aware that it has been brought into discredit by such means, and has given occasion for many unfounded attacks upon those who employ it in cases incurable without it.

It is not my intention to enter into the

consideration of the symptoms and treatment of the various diseases of females, as these have already been ably treated of in the various standard works on the subject, to which I must refer you; my object being merely to give, in as concise a form as possible, a few practical directions, illustrating the treatment, with cases, many of which have come under your own observation.

I have repeatedly been asked, how it happened that our forefathers treated female diseases successfully, as well as the present generation of medical men, without the use of this instrument. To which I would reply, that many went to the grave with the seat of disease undiscovered; and that at this moment there are, to my own certain knowledge, many who have been and are treated for affections under which they are not laboring, whilst the true cause is unknown. Many an unfortunate girl is laid on a reclining board, and treated for spinal disease, when in reality she is laboring under uterine irritation.

It is generally supposed that married women are alone liable to inflammation, ulceration, &c. of the womb ; and no doubt they are more peculiarly so ; but it is by no means uncommon to find similar conditions in the unmarried. This opinion I think it right to state, as I am aware of instances where the proper examination would not be permitted, in consequence of the above impression.

There are a variety of specula employed ; each possesses more or less value, and some are very ingenious. Me. Boivin's speculum consists of two half cylinders, joined at their outer ends, and opened by means of a key working a cog-wheel with teeth. Mr. Beaumont has invented one which consists of five blades, which are made to dilate by means of a string attached to a central peg. Mr. Fenner uses one of equal diameter, made of metal or glass, furnished with an air cushion of bladder or the crop of a fowl, to facilitate its introduction ; and my friend Dr. Churchill has invented a metallic

one, which I think a great improvement upon Mr. Fenner's, which is very easy of introduction, and useful in practice. It is made of metal, of the same form and size throughout ; and instead of the air cushion, the top of the inner end is rounded over, so as to cause its easy introduction. Dr. Macintosh employed a speculum with a tight-fitting obturator, perforated with holes to admit air, and found it very useful when leeches were required to be applied.

Besides these, there are plain glass conical specula ; glass, coated on the outside with caoutchouc ; conical metallic, and ivory ; and metallic specula, with two and four valves. The instruments that I am in the habit of using are Ricord's four valved specula, made of German silver highly polished, with running bolts to keep them distended when introduced. One of them, you are aware, has its blades shortened one inch and a half, and is very useful where the uterus is lower than natural, or where it is requisite to apply dressings to the

lower part of the vagina only. But the one which will be found most useful in all cases is the long four bladed speculum, with side slits to enable it to be formed into a two bladed instrument. The handles should be made so as to be capable of detachment, for the convenience of carriage, and care should be taken to keep it bright after each introduction. Many practitioners disapprove of glass specula, in consequence of their fragility. I have, however, used a strong conical glass one for several years, without apprehension ; and for the application of leeches to the uterus it is most valuable, and supersedes the necessity of passing ligatures through the tails of the leeches, a plan requisite if the four bladed speculum is employed.

One of the reasons, and indeed the principal reason why females object to the use of the speculum, is from the supposition that they must be greatly exposed during its application. This is an error, as the instrument can be introduced, and the

diseased part brought into view, without any exposure save what is requisite to shew the end of the speculum. The following is the method you should adopt in its application. The patient being placed on her left side as during labor, the position of the uterus is first to be ascertained, by introducing the two first fingers of the right hand previously oiled ; the speculum having been warmed and oiled, is then to be passed under the bed clothes, and introduced. The sheet can be drawn tight round the extremity of the instrument, and the obturator withdrawn by approximating the handles of the instrument. Much trouble and time is saved by the knowledge of the position of the os uteri, which can only be acquired by the previous introduction of the fingers. In most cases I prefer using the instrument without the obturator, as the withdrawal of it is sometimes productive of considerable suffering. In some instances I have been obliged to place the patient upon her back prior to introducing

the instrument, owing to the disease being situated at the back part of the vagina, and the posterior lip of the uterus being principally engaged. From the indelicacy of the position, however, it should never be done unless circumstances absolutely demand it. It is of the utmost importance that the patient shall lie in such a position, that a ray of light can be directed through the speculum, and a correct view of the parts be obtained. This is far superior to the use of a candle, which, although it enables the operator to see the disease, prevents him forming a correct opinion of the colour and condition of the parts. The use of a crystal I have also found of no practical value.

In introducing the instrument, it is of importance to bear in mind that it ought to be passed in the axis of the outlet of the pelvis, viz. upwards and backwards ; and it will facilitate the process, if the handles are first placed towards the pubis, and rotated whilst passing through the vulva,

so as to come close to the rectum. No force whatever ought to be used ; and in causing the handles to approximate, care should be taken to do so very gently and gradually. The instrument will require to be moved in different directions, until the part wanted is brought into view.

For the application of leeches, so often necessary in cases of inflammatory congestion of the cervix uteri, the patient should be placed in the same position as for labor, and a conical glass or metal speculum passed up to the uterus ; care being taken that no part of the vagina is left around the rim of the instrument, as the bites of the leeches are not painful when the uterus only is wounded, but excessively so if the vagina is. Any adherent mucus is to be carefully wiped off, and the leeches put into the tube in the number required, eight or ten being the usual number. The mouth of the speculum is to be filled with lint, which requires to be pushed towards the extremity applied closely to the uterus,

carrying the leeches along with it. In ten minutes the lint may be withdrawn, the speculum being allowed to remain in the vagina until the leeches fill, which will generally occupy from twenty minutes to half an hour. Occasionally, however, it is necessary to detach an odd one, which may readily be done by dipping a camel-hair pencil in a solution of common salt, and applying it to the head of the leech. Generally speaking, the bites bleed freely, and heal without any trouble. I think it a good plan to apply the speculum so that the mouth of the uterus shall be external to its margin, as in one case I knew of troublesome symptoms arising from a leech crawling into the cervix uteri, and there adhering.

I have stated that the virgin uterus is occasionally the seat of disease ; and care should be taken to ascertain the existence or absence of the hymen ; as I do not think a practitioner would be warranted in employing the speculum if the hymen exist.

In the few cases in which I have used it, that membrane was absent, a circumstance I have very frequently found accompanying disease of long continuance. The following case will give a good example of disease occurring to the unmarried female.

CHRONIC CONGESTION OF THE CERVIX UTERI,
WITH SLIGHT ABRASION.

M. B. æt. 35, unmarried, consulted me July 16th, 1846. States that she has always menstruated regularly, and that for the last two years she has suffered from excruciating pain in the back, with a burning sensation low down in the pelvis, attended with a sense of bearing down, pain, and heat in passing water, and a continual leucorrhœal discharge. She is much emaciated, and has no appetite; bowels constipated, tongue loaded, and great depression of spirits; experiences much distress either in walking or driving, as the jolting of the vehicle hurts her. Has consulted various medical

men, and been treated for different affections ; has been bled, leeches, and blistered without any benefit ; has never submitted to a vaginal examination, nor been required to do so. On practising the toucher, I found the cervix uteri lying in the axis of the cavity of the pelvis, within an inch of the vulva ; hot, dry, and hard, and very painful when pushed upwards. The speculum revealed a full and congested cervix, of a deep red color ; and on wiping off the adherent mucus, a slight abrasion on the anterior lip of the uterus was seen. The mucus trickling from the os was quite transparent ; and on separating the lips of the uterus, no disease could be detected. The upper part of the vagina was of a deep red color, and covered with muco-purulent matter. A slightly elevated portion of the membrane around the meatus urinarius was inflamed, and very sensitive to the touch.

The following treatment was adopted. The abraded surface of the uterus was touched with the solution of nitrate of

silver, twenty grains to an ounce of distilled water ; the bowels were relieved with ten grains of the inspissated ox-gall, and a hot bath ordered, together with absolute rest. She was ordered to take infusion of gentian, with Brandishe's alkaline solution, and tincture of henbane.

20th. Much the same as to uterine sensations, although improved in general health ; still complains, however, of great pain in her back, and bearing down. Eight leeches were applied to the neck of the uterus, which bled well, and the firing iron applied to the back. Continue the mixture, and repeat the hot bath on the 23rd.

26th. Much better in every way. The abraded surface again touched with the caustic solution, and a piece of solid nitrate applied to the tumified meatus urinarius, and injection of oak bark and alum ordered for the vagina.

30th. Feels much easier, and complains only of the pain in her back, and bearing down when she stands. The cervix uteri

is much softer and smaller, and consequently higher in the vagina. The abraded surface is much lessened, and the leucorrhœal discharge greatly diminished. The tonic mixture and the bath to be continued.

In the month of August this patient went to the country, and I did not see her till the latter end of September, when she was quite recovered, with the exception of a slight sense of bearing down after walking much.

Whilst considering the use of the speculum in these cases, I must not omit to draw your attention to a most important adjunct in their treatment; I allude to injections into the vagina of various medicated fluids. In the majority of instances the injection is badly used, as no portion of the fluid comes in contact with the diseased surface. You have seen different kinds of instruments employed, glass and pewter female syringes, gum elastic bottles and tubes, and curved syringes with a valvular stop, to fit

close to the vulva, so as to retain the fluid. The most complete instrument, however, for the purpose, is one invented by Dr. Whitehead of Manchester, and called by him the prolapsus uteri tube. This instrument I have used with great benefit; and what I think greatly enhances its utility is, that the patient can employ it herself without any trouble. It is made of thick glass, with a bell mouth, and having a curved piece of glass attached to the fore part, which has the effect of directing it through the axes of the pelvis, and causes the os uteri to be fully exposed. Dr. Montgomery's curved tube will also be found most valuable in practice.

The speculum is occasionally required to aid in the introduction of the uterine sound; although, when a practitioner has used the sound frequently, he will often find it of use in assisting him to introduce the speculum. The profession are indebted to Dr. Simpson of Edinburgh for the discovery of this valuable instrument. It is made of

flexible metal, which can be bent in any direction required ; and has a number of marks by which the distance which it passes into the uterus can be measured. In Dr. Simpson's hands it has been very valuable in detecting the various displacements of the uterus, particularly ante- and retroversion. He has also met with a much larger number of cases of the latter affection in the unimpregnated female than I believe any other practitioner has ; and although my experience on the subject has been pretty extensive, having used the sound in a great number of cases lately, I have not been able to detect one where the uterus was retroverted ; although I could with facility retrovert it with the instrument. However, from the eminent position that Professor Simpson holds, it is probable that the most difficult and critical cases are sent to him for treatment, and that in this way he meets with cases of an extraordinary character.

I have found the uterine sound of great

value in cases of dysmenorrhœa, depending upon a narrowing and strictured condition of the cervix uteri, which gives rise to agonizing pains at every menstrual period. These are completely relieved by the use of this instrument. In one case, I was unable at first to pass the smallest sized gum elastic catheter through the cervix uteri ; but by bending a silver dressing probe, I succeeded in passing it ; and by gradually encreasing the size of the instrument, I was enabled at length to pass the uterine sound up to the notch on its convex surface. The lady, who had submitted to every kind of treatment for years, experienced great relief, and now menstruates without any suffering. I have another lady under treatment at this present time, who comes up to town a considerable distance, two or three days prior to the time the menstruation should appear, for the purpose of having the instrument passed. Considerable benefit from the practice has already accrued, and I have little doubt

that the result will be similar. In these cases it is requisite to pass the sound a day or two prior to the appearance of the discharge, and in some it will be necessary whilst the patient is menstruating.

It is needless to add, that this condition of cervix uteri is a very fertile source for the production of sterility.

The same talented professor has also invented a new form of pessary, for keeping the uterus in situ when restored to its normal position. This instrument consists of two portions, which fit into each other ; one part is furnished with a smooth flat piece of ivory attached to a metallic bulb. This is passed into the uterus, the lips of which rest upon the bulb part ; the other portion, formed of flexible metal, is then adjusted, and bent to fit over the pubis externally, and is kept in its place by means of bands passing through holes for the purpose. It would be impossible to give a correct idea of the instrument without plates. I must, therefore, refer you to the May number for

1848, of the Dublin Quarterly Journal, where you will find a full account of it, and of the uterine sound, illustrated with plates.

From my own experience, I cannot speak of the value of the uterine pessary, never having employed it. It has, however, been stated by Dr. Ashwell not to possess the advantages its inventor lays claim to but to prove absolutely injurious. In his late work he says :—"Two cases have recently come under my care, and I have heard of more, where the results arising from the use of this instrument have been very serious. Looking at it pathologically, I can scarcely imagine anything better devised for inducing disease. According to this practice, a piece of ivory, two inches and a half long, is to be introduced into the uterine cavity, and its bearing must of necessity be on some part of the lining membrane, a surface ill adapted to support the pressure for two or three months together of such an instrument. The consequences

may be supposed. One of the patients, (from whom, after a long and distressing journey, I removed this ivory one-pronged fork,) told me she had never been free from pain since its introduction. In addition, it had produced frequent and intense sexual excitement, preventing sleep for many nights together, and had kept up a constant leucorrhœal discharge. In the other example, during the two months this instrument had been worn, the sufferer, in addition to the previous complaints, had never been free from sanguineous discharge, lumbar pain, and frequent desire to micturate. In both, the speculum showed that abrasion of the os and the ostium vaginæ had resulted from the use of the so called uterine supporter." Dr. Ashwell's standing in the profession is well known, and his opinion must consequently possess considerable weight. There is no doubt, however, that any innovation is looked upon with suspicion, and it is only right that it should be so; further trials with the instrument will

either establish its utility, or cause it to be discarded altogether.

Various applications are resorted to in the treatment of uterine affections, nitrate of silver, potassa fusa, acid nitrate of mercury, &c. The nitrate of silver is used both solid and in solution, according to the effect required to be produced, and the strength of the solution must be varied by the practitioner as the case progresses. It is well known that the manner in which the nitrate of silver produces benefit in cases of ulceration, is by affording an artificial coating to the ulcer. The parts being naturally in a moist condition, the ulcer cannot heal when constantly exposed to that moisture. The eschar formed by the nitrate protects the surface, and permits the granulation of the ulcer to take place undisturbed. It is exactly in the same way that the solution of gun cotton acts—a plan of treatment which I lay claim to having introduced to the notice of the profession. Having made use of this solution in various

cases of cuts, &c. it struck me that it would form a good protective varnish to the ulcerated surface of the uterus; I accordingly tried it, and with the best results. The method used in applying it is the following: having brought the ulcer well into view, by means of the speculum, I dried its surface with repeated pieces of dry lint, until all adhering mucus had been removed; and quickly applying the solution with a camel hair pencil, varnished the surface over with it. This process should be repeated three or four times, until a good coating is given. The application is attended with a slight burning sensation, followed by a feeling of cold from the evaporation of the ether; but it quickly goes off. The application requires to be renewed in twenty-four hours, as the secretion collects underneath the varnish, and detaches it. In cases of simple abrasion, three dressings have proved sufficient; in more obstinate cases, and where large granulations have existed, I have used caustics first, and then applied a

varnish of the gun cotton over the eschar ; and thus succeeded in curing extensive ulcers in half the time I have been able to succeed without the solution.

In cases of vaginitis without ulceration, I have found the painting of the walls of the vagina with the solution most beneficial. The difficulty, however, is to dry it well, which requires both time and care ; but in my mind the result amply repays both, the friction of the surfaces is prevented, and the amount of suffering, pain, and inflammation consequently much diminished. The following formula, which I copy from the British American Journal, will be found the best for making the preparation, and every one can prepare it himself. Take of nitric acid sp. g. 1.350 (the ordinary sp. g. of commercial nitric acid) ℥ij ; sulphuric acid (commercial) ℥iv . Having mixed the acids in a glass vessel, stirring them with a glass rod, add immediately of freshly carded cotton 3ij ℥j , and digest for the period of fifteen minutes. The acid is

now to be poured off the cotton, and the latter washed with water until litmus paper is not affected. The cotton is to be finally squeezed between the folds of a clean towel, to remove as much water as possible, teased out, and finally pressed between sheets of blotting paper until quite dry, and instantly thrown into rectified sulphuric ether. The quantity of gun cotton thus formed is sufficient for about a pound of ether. It should form a transparent, colourless liquid, somewhat of the appearance of thin mucilage.

The acid nitrate of mercury is one of the most powerful caustics we can employ, and is of especial use where it is required to cut down quickly large and flabby granulations. It has also been much extolled in cases of cauliflower excrescence, and cancerous ulcers. I have used it with much benefit after the removal of polypi from the uterus by means of the ligature. In employing it, care should be taken that no part be touched except what the operator wishes.

I have found it easiest applied with a camel hair pencil, which should be pressed against the lip of the bottle, to remove any superfluous quantity ; the pencil then quickly passed through the speculum is applied to the ulcer, and a syringe full of warm water should be injected immediately afterwards, and a piece of lint applied to the part. This application often gives rise to much irritation, and seldom requires using more than once a week. The preparation is made by dissolving one hundred parts of mercury, by aid of heat, in two hundred parts of nitric acid of commerce, and evaporating the solution until it is reduced to two hundred and twenty-five parts. It is a clear, transparent fluid, and should be kept in a glass stoppered bottle.

It is by no means an uncommon thing for the practitioner to be consulted by females, owing to the amount of pain they suffer from pruritus of the genitals. This in some cases is so excessive, and the desire of assuaging it by scratching becomes so

imperative, that the unfortunate creature is frequently obliged to retire from society for the purpose of gratifying it. I have met with instances both in unmarried and married women ; most frequently, however, by far in the latter. I have also seen it at almost every age, from the infant in arms to the woman of seventy. Generally speaking, in the young it is a symptom of inflammation of the vulva. It may also be the result of uncleanness, or be symptomatic of deeper-seated disease. Ascarides in the rectum may also produce it, and Mr. Lawrence describes a case produced by worms in the bladder, in which from 800 to 1000 were discharged with the urine at different times. After some time an abscess formed, and broke into the vagina, and through the sore one worm was discharged ; they were unlike any of the intestinal worms ; the large ones were mostly from four to six inches in length ; they were slender in the middle, where they almost uniformly appeared as if broken, increased

gradually in both directions from this middle point, and then decreased again to the two extremities.

When it proceeds from inflammation of the mucous membrane covering the vulva, there are frequently other symptoms added ; for instance, the patient will tell you that in walking there is a sensation of bearing down, considerable pain in the back, and leucorrhœal discharge ; the pain is frequently referred to the last bone of the sacrum, and she cannot sit long in one position, but is compelled to move from one ischium to the other. If a married woman, pain will also be felt in coitu ; this, at first trifling, becomes eventually so intense as not to be tolerated. If an examination of the parts be made, they will present a fuller and redder appearance than natural ; the introduction of the finger into the vagina is accompanied with severe pain until it passes the sphincter vaginæ, which is very frequently much contracted ; no pain is felt on pressure upon the uterus, nor pas-

sage above the sphincter. If a careful examination of the parts external to the sphincter be made, small eminences and depressions may sometimes be detected; these are the mucous follicles inflamed and indurated. I have seen them sometimes as large as a swanshot, and exquisitely sensitive : small apthous ulcers are also very common.

It is a matter of importance in these cases, to ascertain whether there may not be some disease going on at the neck of the uterus, as many of the symptoms now enumerated belong also to several uterine affections. As a precautionary means, therefore, I think it advisable to employ the speculum in every instance where it is not contraindicated.

The treatment that I have found most useful for the vulvular inflammation has been the frequent use of the hip-bath and poppy-head stupes, until the more urgent symptoms of inflammation have subsided. The irritation and itching has been best

allayed by the application, three or four times a day, of a solution of nitrate of silver in the proportion of a drachm to the ounce of distilled water. In some cases I have found benefit by alternating the caustic solution with tincture of matico, applied in the same way, viz., by a small piece of sponge tied on the end of a stick, or with a camel's hair-pencil.

We shall also derive benefit from the internal exhibition of mild saline purgatives, rest, and sea-bathing; it will frequently, however, occur, after almost all our remedies have failed, and the disease has been of considerable standing, that the administration of alterative doses of mercury will effect a cure, although not the slightest trace of syphilis be present. The preparation I have used most frequently has been the Plummer's pill, five grains night and morning.

I have also seen much good effected by giving twenty-drop doses of Brandishe's alkaline solution in an ounce of any bitter

infusion, such as gentian or quassia, two or three times a day. When the pain in the back is troublesome, being frequently more that of a dull ache than acute pain, the application of the cautery to the sacrum affords very great, and in many cases instantaneous relief.

Besides the plan of treatment alluded to as having been adopted in this affection, I may mention that the various soluble salts of lead, zinc, and mercury, narcotic preparations, borax, hydrocyanic acid, &c. have been used. With some practitioners the exhibition of balsam copaibæ, and the application of bread crumb soaked with liquor plumbi diacet. has proved useful, and in some cases effected a cure. Gelatine and bran baths have been also much extolled.

On looking over the registry, I find a vast number of cases of this affection, complicated with different vaginal and uterine diseases. The following case, however, as possessing some points of interest indepen-

dent of the symptom of pruritus, I have selected :—

PROLAPSUS UTERI COMPLICATED WITH PROLAPSE
OF THE URETHRA.

Mary Fox, a char-woman, æt. 56, mother of five children, applied for relief at the South-Eastern Lying-in Hospital, January 6, 1846, under the following circumstances:—She stated that about two years ago her womb came down after a severe day's work, that at first she did not mind it, but owing to the great quantity of mucus discharge, she became so debilitated as to seek for advice. She applied at a dispensary, and by the use of cold lotions and aperient medicine she was relieved very considerably ; that about two months ago she first perceived a difficulty in passing water, the desire for which was frequent, and the pain and scalding very severe ; sometimes the stream would be suddenly stopped, at which time her distress became

greatly increased. Pruritus of the genitals was also most distressing.

On examination per vaginam, the uterus was found prolapsed in the second degree (the semi-prolapsus of Madame Boivin,) the anterior wall of the vagina much relaxed; and the entire of the lower outlet much dilated. The parts were not at all tender to the touch, except on approaching the meatus urinarius, around which a vascular tumour about the size of a cherry was distinctly seen. The surfaces against which the sides of the nymphæ approached were ulcerated, together with the mucous membrane covering the nymphæ. Those internal or towards the orifice of the meatus were of a livid red color. The whole tumour was very painful and sensitive to the touch: at first it appeared as if it were growing out of the urethra; but on examining it more carefully, it was evident that the entire tumour was formed of the mucous membrane lining that passage; as by a careful reduction of the part, it gra-

dually unfolded itself, and by following it into the bladder with the finger, the entire swelling disappeared. The urethra was so much dilated, that the middle finger passed through it with ease.

As soon, however, as the pressure of the finger was removed, the tumour reappeared ; the reduction of it was extremely painful, and she felt the greatest relief when it was allowed again to protrude. Under these circumstances, it was plain that before it could be returned it would be necessary not only to diminish its bulk, but also to heal the ulcerated surfaces ; for this purpose, the tumour was slightly touched with the acid nitrate of mercury, the action of which was moderated by cold water ; she was ordered to be kept quiet, and an opiate administered. The after-treatment consisted of the use of nitrate of silver every third day, until the ulcers were healed, and the swelling much diminished. It was then reduced, and a piece of bougie introduced through the urethra, so as to

prevent its protruding. The urethra, however, was so much dilated, that the swelling reappeared at every time the urine was evacuated ; a piece of sponge was then cut in a circular form, sufficiently large not only to fill but to distend the urethra ; into the centre of this a large quill was imbedded, so as to allow the urine to escape from the bladder. This had the desired effect of not only reducing the swelling, but of keeping it in its natural situation. It could not be endured for more than a few minutes at a time. By continuing, however, the use of the nitrate of silver every second day, the part became so small as to give no annoyance. A globe pessary was introduced to support the uterus, and she has since returned to her work quite well, having been nearly two months under treatment. A very accurate drawing of the parts was made by Mr. Neilan.

Under the name of vascular tumour of the meatus urinarius, Sir C. Clarke describes a swelling very similar to the one

just related ; he says that it is both common to single and married women. In all his cases the patients were under the middle age, and chiefly young women. He observes that "instances sometimes occur of great pain and tenderness to the touch in the region of the meatus urinarius, accompanied by a thickening of the part ; so that if the finger is passed into the vagina, considerable uneasiness is produced, but upon exposing the parts no disease is visible ; this also is attended by a mucous discharge." How far such a symptom may render it probable that this disease is going on in the cavity of the urethra, it may be difficult to determine. In a patient under the care of Sir James Earle in St. Bartholomew's Hospital, this symptom was present ; and upon exposing the parts, a tumour of a scarlet colour, nearly filling up the orifice of the urethra, was brought into view.

Dr. Davis, in his Principles and Practice of Obstetric Medicine, describes a case in which a fungoid excrescence occupied the

whole length of the urethra, and formed a circular ridge of about half an inch in breadth, which could be felt, on the introduction of the finger, to be attached round the inner surface of the neck of the bladder. By the judicious application of pressure, this disease was completely removed.

Patients, when affected with leucorrhœa, frequently suffer intolerable pain in the small of the back, and I have repeatedly proved that the discharge in these cases comes from the uterus, or, in other words, that it is uterine leucorrhœa. I have for some years been in the habit of using the firing iron to the back in these cases, and with the best results. I am indebted to my friend Dr. Corrigan for the suggestion, as it was from him that I first learned the benefit that accrued in cases of muscular pains in the loins. Reasoning from which, I thought it might also relieve the distress in leucorrhœal cases, and this opinion experience has confirmed. The instrument should be about eight inches long, made of steel set in a

handle, and terminating with a button extremity about the size of a fourpenny piece, and three times as thick. The method of using is as follows. The button is to be heated in the flame of a spirit lamp, and the finger of the operator placed on the stem of the instrument, within half an inch of the button, which will be hot enough when the finger can no longer be borne in that situation. The back of the patient being previously prepared, the instrument is to be quickly and lightly applied along each side of the spine ; not continuously, but so as to allow half an inch between each spot that the button touches, which should be from six to eight on each side. The pain of the application is very trifling ; a slight burning sensation lasts for about twenty minutes, and generally speaking the relief afforded is great, and in some cases immediate. No dressing of any kind is required, and the operation may be repeated in three or four days ; most patients being anxious for its repetition on having once experienced benefit from it.

Occasionally, however, the effects will not be so favourable as those described, and in one or two cases I am persuaded that the pain was increased by its application. However, as a remedial measure, I have no hesitation in recommending it to your notice, as you must have been aware how many cases were relieved by it.

In looking over works on diseases of females, we shall find that a variety of discharges come under the term of *fluor albus* or whites; many of them having no connection with the uterus, except only as it affords a means of transit. I allude to discharges of pus from the ovaries, &c. Again, a white discharge may appear as the consequence of acute, sub-acute, or chronic inflammation of the uterus. It is also well known that the vagina itself may be the seat of the disease, giving rise to what has been termed vaginal leucorrhœa, in contradistinction to uterine. It is to this latter form of disease that my attention has been directed more particularly.

For the purpose of more accurately stating the plan which I adopt in the treatment of uterine leucorrhœa, I shall call your attention to the composition of the lining membrane of the uterus. Heister, Morgagni, and Madame Boivin compare it to the serous membrane which lines the vascular system ; Cruveilhier admitted that it was mucous membrane during pregnancy only. That mucous follicles are only to be found in the cervix has been held by many anatomists, and that a totally different membrane was present in the fundus—in fact, that the uterus contained both mucous and serous membranes. Those who hold this view of the case, maintain that in all cases of uterine leucorrhœa the source of the discharge is the cervix, and that all that is necessary to cure the disease is at once to obliterate the vesicles of Naboth : and M. Huguier goes so far as to propose that the cervix uteri should be freely divided with a long-bladed knife, in order that the surface may be more effectually cauterized. When

we recollect that the fundus uteri is the chief source of the catamenia, we are at once inclined to think it impossible that the leucorrhœa, which often supplies the place of the sanguineous flow, and generally precedes and follows it, can have any other source. Madame Boivin, speaking on this subject, says : “ With regard to the cervix, it is well known that it has numerous follicles, and secretes a viscid and abundant mucus in its natural state ; and that leucorrhœa is an accompanying symptom in many affections in which the cervix only is diseased. It may also be observed that lactiform whitish discharges per vaginam are very frequent in new born-infants, in whom the body of the uterus and the fallopian tubes are very small, and the cervix uteri much developed, open, and generally filled with a copious viscid mucus.” We are, therefore, I think, warranted in coming to the conclusion that there are two species of *uterine* leucorrhœa ; one in which the disease is situated in the cervix, and the other

in the fundus and body. And this view of the subject receives considerable support from the experiments of Weber, who has shown with the microscope the existence of follicles in the fundus uteri in the cow, and also in the human subject during the second month of utero gestation. Besides which, according to the statement of M. Chassaignac, the secretion in the fundus uteri is acid, whilst that of the cervix is alkaline. Here then we have, I think, sufficient data to go by, and I conceive that if we have any means in our power of ascertaining with facility whether the source of the disease be from the cervix or fundus, one of the greatest objects in a practical point of view is effected ; and this desideratum I am of opinion has been achieved.

The instrument which I employ is simply a gum-elastic catheter, twelve inches in length, having its extremity free. The stilet, which passes through it, is furnished at the end with a protuberance, be-

hind which a number of slight notches are made, for the purpose of more firmly fastening a piece of litmus paper on it. The instrument being thus prepared, and the patient being in a proper position, the speculum vaginæ is introduced, and the catheter passed for about an inch through the cervix uteri. The stilet is then gently introduced, and allowed to remain quiescent for a short time to permit the paper to be moistened with the discharge in the cervix uteri ; it is then withdrawn again into the catheter, before the latter is removed from the cervix. The entire instrument is then withdrawn, and the paper examined. If it come back of its original blue colour, the disease is in the cervix ; if, however, it be reddened, we have then evidence to prove that the source of the discharge is from the fundus uteri.

Having ascertained the seat of the disease; the after-treatment becomes very simple, in the event of its being found to be in the cervix. The catheter should again be

introduced without the stilet, and having previously filled the gum-elastic bottle with any fluid which may have been selected, it may be attached to the catheter, and the fluid gently injected. The fluids that I have used have been diluted sulphuric acid, in the proportion of half a drachm of acid to the ounce of water, and also a solution of acetate of lead, 3ss. to 3i. of water. In some cases where there has been a difficulty in passing the instrument into the cervix, or where the inside of the lips of the os uteri have been abraded, giving rise to a slight oozing of blood on the gentlest attempts to introduce the tube, I have not persisted; but have contented myself with applying nitrate of silver to the surface, so as to heal the ulcer prior to passing the instrument. In like manner, where the mucous glands of the cervix are much enlarged, I prefer smearing the extremity of the tube with an ointment consisting of ten grains of nitrate of silver to a drachm of sperm ointment, having previously passed the

instrument without any ointment on it, and wiped it clean from all adhering mucus—a precaution just as necessary as that required in ulceration of the os uteri; as the application would otherwise be prevented from exerting its full influence on the diseased surface.

The introduction of the instrument (if no force be employed) is very easily effected, and little or no pain is felt by the patient. In some I have observed a sensation of sinking, and they have told me they felt faint, as if about to be unwell.

In my first experiments I introduced the instrument quite through the cervix into the body of the uterus, having previously covered the extremity of the tube with a piece of soft wax, to prevent the admission of any fluid in its passage through the cervix. On consideration, however, and taking into account the increased suffering produced by the passage of the tube so far up, one woman suffering so much from pain in the hypogastrium, which continued

for more than two hours after its introduction, as to excite considerable alarm in my mind, I determined not to pass the instrument beyond the cervix ; as in the event of the discharge coming from the fundus, it should necessarily pass through the cervix, and thus give as satisfactory a proof of the source of the discharge as if the instrument had been passed higher up.

I also discovered that the temperature of the injection produced a considerable effect upon the woman, and that where it was employed quite cold, the shock was sometimes very great. To obviate this, I have latterly taken care that the injection shall be tepid ; and although I cannot say that it is quite as powerful an astringent as when used cold, still I have found it very beneficial, and far superior to the common methods employed.

It will be observed that I have spoken chiefly of the disease when the cervix uteri has been affected, but I have found a similar treatment of great value in those cases

where the fundus was decidedly its seat. From the cases I have as yet employed it in, I should feel inclined to say that as a mere local application it is invaluable ; but it will not in a weak anæmic female restore the natural good health, nor could it be expected ; so that whilst advocating its utility, I by no means wish it to be understood that I undervalue the various therapeutic means which have been recommended for the treatment of this annoying affection.

The following will give a good illustration of the cases in which it is applicable.

Eliza Donohoe, æt. 41, residing at 3, Mespil-road, applied at the South-Eastern Lying-in hospital, December 21, 1846. She stated that she was the mother of seven children ; that she had never miscarried, and had enjoyed good health until about a year and a half ago, when she first perceived a whitish discharge, as she said, like half-boiled starch ; that the catemenia have always been regular, but that as soon as they disappeared, she suffered from the

whites. She now complains of great pain in her back, loss of appetite, and great general debility and lassitude; her bowels are constipated, and she suffers much from itching and swelling of the vulva.

On examination per vaginam with the finger, not the slightest trace of disease could be perceived; with the exception of a slight pulpiness of the os uteri, which was more patulous than natural. On exposing the parts to a good light, by means of the speculum vaginæ, no abnormal alteration could be perceived. From the lips of the uterus the leucorrhœal discharge could be seen trickling; this was wiped away with a sponge, and the tube passed in the manner before described; no change whatever was seen to be made on the litmus paper, and I injected at once two drachms of the acetate of lead solution.

The passage of the instrument was effected with scarcely any suffering, and after remaining quiet for about an hour, she walked home.

26th. I saw her again ; she says that the pain in her back continues, but the discharge has quite disappeared. She was ordered a mild aperient mixture, and told to come in four days again.

On the 30th the injection was again repeated, and no pain suffered on its introduction. This plan was adopted every fourth day for three weeks, the bowels were well freed by saline purgatives, and small doses of citrate of iron and quinine administered. By this time she was completely cured, and her name taken off the books.

In fig. 4, a very good specimen of the disease is shewn, in which the os uteri was ulcerated ; and after the healing of it by repeated dressings with solution of nitrate of silver, the uterus was injected three times with two drachms of the acetate of lead solution, used cold ; and with the best effect. The mucus is seen trickling from the mouth, quite opaque.

Many practitioners are afraid to employ uterine injections, owing to the danger of

peritonitis from the passage of the fluid through the Fallopian tubes into the peritoneum. If, however, care be taken to employ an instrument similar to the one I have just described, and which I exhibited at a meeting of the Surgical Society of Ireland last winter, there is no likelihood of the fluid passing through the Fallopian orifices; as there is plenty of room for the injection to trickle out on either side of the tube. It is, however, by no means unusual for the patients to feel apprehensive, and have more or less hysterical symptoms.

It is only right to add that in many cases in which I have used the litmus as a test, it has returned unchanged, proving that the discharge was neutral.

Occasionally it happens, after we have succeeded in healing an ulcerated surface, and all discharge has ceased, that the symptoms of bearing down continue nearly as bad as ever. If we examine the state of the uterus, we shall be able at once to account for these symptoms. The cervix

uteri will be found hard, hypertrophied, and slightly prolapsed. For the relief of this condition, it will be requisite to cauterize deeply. M. Jobert effects this by means of the actual cautery applied to the indurated part. I have never used this method, therefore am not competent to form an opinion on it ; but I may state that its advocates consider it quicker in its action, less painful, and more efficacious than caustic preparations. The Vienna paste, formed with equal parts of quicklime and potassa fusa, is strongly recommended by M. Gendrin. The lime and potash should be kept separate until required for use, and should be made into a paste with a little white of egg, or spirit of wine. The following is the method recommended by Dr. Bennett for its application, and which I have found very efficacious. When applied to the uterine cervix, a large and conical speculum must first be introduced, and the engorged cervix made to enter its orifice ; or should the cervix be too voluminous, the

speculum must be firmly pressed on the part which it is intended to cauterize, great care being taken not to enclose between the rim of the speculum and the cervix a fold of the vagina. About as much of the paste as would cover a fourpenny piece a line in thickness, must be placed on a triangular piece of diachylon plaster, one end of which is inserted lightly into the cleft extremity of a small stick ; the caustic paste is then carried by means of the stick to the cervix, and applied to the centre of the part comprised by the orifice of the speculum. With the long forceps, cotton is placed carefully all round the spot on which the caustic is applied, so as to completely protect the neighbouring parts ; the stick having been withdrawn, the speculum is two-thirds filled with cotton or lint, which is firmly pressed against the uterine neck. The speculum is then extracted, the cotton which fills it being forcibly pushed back into the vagina with the forceps as it is pulled away, so that the vagina remains thoroughly plugged.

If all this is carefully done, it is impossible for the caustic to fuse, and to injure the parietes of the vagina. In about fifteen or twenty minutes, the cotton or lint must be gradually withdrawn by means of a bivalve speculum, and an eschar of the size of a shilling, or rather larger, will be found where the caustic was applied. The vagina should then be washed out with a little tepid water, complete rest in bed enjoined, and emollient injections employed until the separation of the eschar, which takes place from the sixth to the eighth or tenth day.

I have found a modification of this plan of using the Vienna paste very successful, and one, which I would recommend the beginner to adopt in his first essays at deep cauterization. The parts having been brought fully into view by means of Ricord's four-valve speculum, I apply the paste in the following manner, and with a small instrument which I have invented for the purpose, and found very useful. This instrument consists of a rod of glass, seven

inches in length, having a disk of the size of a fourpenny piece at its extremity. This rod is passed through a tube of glass six inches long, terminating with a bell mouth of the size of a shilling. The caustic paste having been spread upon the little disk, the whole is to be passed through the speculum, and the bell mouthed tube applied closely to the part to be cauterized. The rod is then to be protruded, and the caustic brought in contact with the uterus. The speculum can then be withdrawn or not, at the pleasure of the operator, the tube protecting the vagina from the caustic, and the only disagreeable part is the necessity for the operator to hold the instrument gently pressed against the part for ten minutes, by which time the uterus will be sufficiently cauterized.

The two following cases will, I think, prove instructive, and illustrate the above remarks :—

ULCERATION AND INDURATION OF THE OS
AND CERVIX UTERI. .

Jane Lawson, æt. 34, mother of five children, consulted me June 3rd, 1848. Never aborted ; always nursed her children ; states that she has been exposed to great cold and hardship, often being obliged to stand up above her knees in water for several hours together. Enjoyed good health until the birth of her last child seven years ago, since which time she has menstruated irregularly, and has suffered much from pain in the back and bearing down ; and is much debilitated from constant leucorrhœal discharge. At present she complains of much the same symptoms ; is much emaciated ; appetite indifferent ; tongue covered with a white fur ; pulse 80 ; urine scanty, and depositing a red sediment ; spirits much depressed.

The toucher discovered the uterus in the axis of the cavity of the pelvis much congested, hard, smooth, and not painful, but

moveable ; the os uteri patulous, and looking towards the pubis. On examining with the speculum, the whole of the cervix could not at first be taken in the field of vision ; but by using the long instrument, the congested and swollen condition of the cervix uteri were fully shewn, and are well represented in No. 1. The anterior lip was much indurated, and a tumor as large as a pigeon's egg, and of a purplish color, extended upon the cervix. The posterior lip was occupied by an ulcerated surface, extending more than an inch posteriorly. The edges were fissured, and bled on being touched. The vaginal walls were much inflamed, and coated with a leucorrhœal discharge. No difficulty was experienced on passing the uterine sound, which passed the full distance, as soon as a greater curve had been given to the instrument. The uterus was very moveable upon the sound, and by its means I was able to place the os uteri in its proper position ; but on its

withdrawal, the parts re-assumed their unnatural position.

Considering this case to be one of partial prolapse of the uterus, induced by congestion of the neck, I adopted the following treatment. The ulcerated surface was first dressed with the acid nitrate of mercury, and absolute rest enjoined. At the end of five days the parts were again examined, and the ulcer found much cleaner, and the discharge lessened. The solution of nitrate of silver was then employed every third day for four weeks, by which time it had completely healed. During this time warm baths were used twice a week, and an injection of acetate of lead daily. The diet was generous, and the medical treatment consisted only of light tonics and mild aperients. Under this treatment she made rapid progress; the discharge nearly ceased, her general health and spirits were much improved, and she gained flesh. At the same time, she could not walk a hundred yards without distress, nor had the uterus

been removed from its situation. Feeling assured that her sufferings depended upon the enlarged and congested state of the cervix, I applied the Vienna paste to the tumor on the anterior part of the cervix ; the slough fell out in nine days, and the artificial sore was dressed once a week with a solution of nitrate of silver. The cervix is now much less congested, smaller in volume, and higher in the pelvis ; but as the induration is not completely removed, I purpose again applying the caustic paste, and repeating it until the entire congestion disappears. The appearance of the parts prior to any treatment are well shewn in fig. 1.

CONGESTION AND INDURATION OF THE CERVIX
UTERI TREATED BY DEEP CAUTERIZATION.

Mrs. L. æt. 39, came under my care as an extern patient at the hospital, Feb. 13th, 1848. Is the mother of nine children ; had one abortion when four months pregnant,

twelve months ago, and dates all her sufferings from that time ; has always menstruated regularly, but latterly with much pain. States that she has been under treatment for a variety of affections, and that six months ago she suffered much from frequent sheddings, which were checked by acid medicines and injections. These sheddings were followed by pain in the back, and a leucorrhœal discharge, which have reduced her much. At present she suffers more from a bearing down sensation than from any thing else, accompanied by a rather profuse muco-purulent discharge. Her tongue is loaded, appetite impaired, bowels constipated. Coition is very painful at times, and occasionally followed by bleeding. The toucher detected a full and congested cervix uteri, the posterior lip being very much larger than the anterior, and having an oval hard tumor stretching transversely across it ; no ulceration can be felt by the finger. On examining with the speculum, the parts appeared as shewn in

fig. 2. The posterior lip had a number of small granular polypi extending into the cervix, which bled freely on being touched. The vagina was highly congested, and the anterior wall much relaxed.

The following treatment was adopted. The bowels were freely purged, and a warm bath three times in the week employed. The acid nitrate of mercury was applied to the granular os uteri, and the after-treatment was so similar to that used in Lawson's case, that it would be an useless repetition to proceed with the detail. Suffice it to say, that the slough fell on the tenth day, and was followed by a good deal of bleeding, which completely removed the congested condition of the os. The leucorrhœal discharge stopped completely, her health and appetite are greatly improved, and she can walk a considerable distance without any suffering. I found the greatest benefit from the use of Donovan's syrup of bark, as a light tonic in this case. This woman was under treatment for nearly three months.

In some cases, where the amount of congestion and prolapse is very slight, it will not be necessary to resort to the employment of either the Vienna paste or cautery; but relief will be afforded by using the tincture of iodine freely. It should be applied with a camel-hair pencil, two or three times a week, over the congested os and cervix uteri.

In the treatment of polypi of the uterus, you will find the speculum of great assistance to you, not only whilst performing an operation for their removal, but in applying dressings to the surface to which the polypus was attached. It frequently also happens that small soft polypi are attached to the edges of the os uteri, so small and soft as to elude detection by means of the finger, but which are easily brought into view with the speculum. Dr. Montgomery has found that twisting them off with a long pair of forceps is the best method to eradicate them. I have never tried this method, but have in-

variably succeeded in destroying them with the solid nitrate of silver.

In applying a ligature round the stem of a polypus, considerable difficulty often arises in encircling it, from the confined condition of the orifice of the vagina. This condition is done away with by the dilatation produced by the speculum; the parts are brought into view, and the operation performed with much greater facility. Occasionally, however, the tumor is so large that it cannot be brought within the range of the instrument. This happened to myself lately, in a case of a very large cauliflower excrescence. Such cases, however, do not in any way detract from the merit of the speculum in ordinary cases. I may state here, although not strictly bearing on the subject, that I would recommend the use of the double canula of Gooch, modified with the slide, and having a small cog-wheel attached to the side, to wind up with a watch key—a very ingenious and useful invention for tightening the ligature daily, and for

which we are indebted to my friend, Professor Beatty. This instrument can be procured at Read's. You will also find that considerable trouble will be saved in the operation, by attaching thin wires to the ends of the ligatures, which enables the operator to pass them through the lower part of the instrument without any trouble; a circumstance by no means so easy when the ligatures have become soft and moistened by the discharges. This suggestion I lay claim to, although not of much importance; still, as it facilitates the operation, I think it worth mentioning.

Until lately, the condition of the uterus after a polypus has been removed has not been taken notice of. Many practitioners, however, are now aware that an ulcerated condition of the os uteri continues after their removal, and that the symptoms and treatment are very similar to ulceration without polypus.

In fig. 3, we have a good specimen of the

condition of the parts after the removal of a polypus. The view is a lateral one, and the uterus is seen to be considerably prolapsed; on its anterior lip a small abraded surface is seen to extend into the uterus. In this case the ligature fell on the seventh day, and no untoward circumstance of any kind occurred. But although the sanguineous discharges were stopped by the removal of the polypus, the leucorrhœa continued; and on examination with the speculum, the cause of the leucorrhœa was speedily detected. By the application of a few dressings of the solution of nitrate of silver, the ulcer quickly healed, and all symptoms of distress vanished.

It is a well ascertained fact, that many married females prove sterile in consequence of ulceration of the mouth of the uterus, this condition most commonly ensuing as a consequence of previous abortion. I say "most commonly," as in practice it will be found that ulceration is the usual result of abortion; and whenever I am consulted on

the subject, I invariably enquire if the patient have aborted at any previous period, and am generally answered in the affirmative.

Sometimes a very considerable amount of suffering will be present, but not by any means invariably so ; as it is notorious that a large surface may be in a state of ulceration without the patient experiencing much pain. Neither is the application of the most powerful caustics attended by any suffering, the patient in many cases being quite unconscious that any thing has been applied to her. This evidently proves that although the uterus is largely supplied with nerves, their sensibility at the cervix uteri is much diminished, if not destroyed.

I think the perusal of the accompanying case will fully bear out the statements above made :—

STERILITY INDUCED BY ULCERATION OF THE
OS UTERI.

On 6th February, 1846, I was consulted

by Mrs. D. æt. 25. She states that she has been married four years, and had one child now three years old ; that twelve months ago she miscarried, since which she has never been well. She complains of pain in the loins and general lassitude ; is unable to walk a hundred yards without suffering greatly from a bearing down sensation, which she says is accompanied by a perceptible falling down of the womb. She has always menstruated regularly, but as soon as the reds disappear, a white matter of the consistence of cream appears about a week after their cessation. At first she experiences a deep-seated burning pain at the lower part of the abdomen, which continues four or five days, as if something were gathering ; during which time she has difficulty in passing water, with great and urgent desire. These symptoms are relieved by the feeling of something bursting in the vagina, and the discharge of the fluid before mentioned. Her bowels are constipated, and she suffers much from hæmorrh-

hoids. Excessive pain is felt in coition, and often followed by the escape of blood. Her appetite is much impaired, spirits depressed, pulse small and weak ; is much emaciated, and imagines she is in a consumption. She has tried every kind of astringent and tonic medicine, together with various vaginal injections, but with temporary relief only.

On examination per vaginam, I found the neck of the uterus more voluminous than natural ; and my finger detected a soft granular ulcer around the os uteri, the lips of which were fissured. The ulcer was situated upon a firm basis, and exquisitely sensitive to the touch ; and the finger was covered with blood when withdrawn. On introducing the speculum, the whole of the cervix uteri could not be brought within its circumference, owing to its bulk ; and I was obliged to place my patient on her back before I could bring the ulcerated surface fully into view. I then perceived that both lips of the uterus were occupied by an ulcer about the size of a crown piece, very vascular,

with large prominent granulations, and extending into the cervix uteri along its posterior lip. I at once applied the acid nitrate of mercury freely to the ulcer, in the manner previously detailed, and directed a saline aperient to be taken, and a hip bath every second day for a week. The application of the caustic was not attended with any pain.

On the 13th the symptoms were much relieved, particularly the bearing down sensation, but she complains of pain referred to the seat of the disease. On examination with the speculum, I found that the granulations were removed, and the ulcer diminished in size, but still very tender and bleeding as before. The introduction of the speculum was attended with a good deal of pain. I touched the ulcer with solid nitrate of silver, and ordered the hip baths to be continued, and strict abstinence from her husband to be observed.

The application of the solid nitrate of silver was continued every fourth day until

the middle of March, the ulcer getting smaller after each dressing. A solution of it, in the proportion of a drachm to the ounce of distilled water, was then employed, as it was found that the solid nitrate produced too much irritation. This treatment was continued until the latter end of April, when the ulcer was completely healed, and all symptoms of distress vanished.

This lady shortly after proved pregnant ; and I have since attended her during her confinement, which was prosperous, and she now enjoys excellent health.

This case, I think, affords a very good example of the disease, and also pretty conclusive proof that so long as the ulcer remained, conception could not take place. I am perfectly aware that pregnant women are often subject to ulcers around the os uteri, and that abortion is frequently caused by their presence ; but I am decidedly of opinion that they appear subsequent to and not prior to conception. There is an objec-

tion on the part of practitioners to employ the speculum during pregnancy, and hence the reason why so few cases are known ; but from actual experience, I am convinced that it may be employed in almost every case without any bad result, and that worse consequences are likely to arise from the presence of the ulcer, than from any injury that the speculum can inflict, if properly introduced. In this opinion I am supported by all the different practitioners both at home and abroad, who have resorted to the use of this valuable instrument.

It will be observed, in the treatment of the above case, that the acid nitrate of mercury was only employed once, and that the nitrate of silver was substituted. This change the practitioner will often find it necessary to make, the caustic proving too powerful ; and as soon as the granulations are removed, the further application of caustic would prove not only useless, but injurious. I call the acid nitrate of mercury caustic, as it is well known that the

action of the nitrate of silver is protective ; and I fully agree with Mr. Higginbotham, in thinking it unfortunate that this valuable remedy should have ever obtained the title of caustic, as it has frequently led to misapprehension of its great value. That the speculum can be employed with perfect safety during pregnancy I have repeatedly proved, and that it is the only plan of treatment likely to prove effectual, in cases where abortion has occurred from ulceration of os uteri, I am also satisfied. The following, from amongst many of the kind, will be sufficient to illustrate my position :

ULCERATION OF THE OS AND CERVIX UTERI
DURING PREGNANCY.

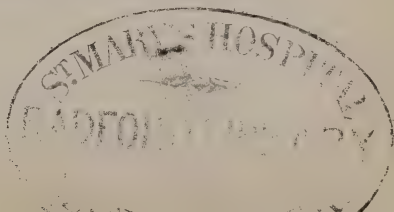
In the month of October, 1847, I was sent for to see a lady at that time in the fourth month of her third pregnancy. I found my patient a young and delicate female, 26 years of age, and so much debilitated as to be unable to leave the sofa. She

informed me that she had miscarried when pregnant her second time, now ten months ago, and that she suffered in exactly the same way now as she had experienced prior to her miscarriage ; and is apprehensive that the same misfortune will occur. She complains of excessive pain in the loins, and a bearing down sensation so great, as to prevent her attempting to walk without considerable suffering, and a total incapacity of going up stairs. There is a copious leucorrhœal discharge present, and considerable irritation of the bladder, with slight tenesmus, and she also labours under hæmorrhoids. Pain in coitu is excessive, and greatly increases her sufferings. Her general health is much affected, and she has a number of dyspeptic symptoms, induced no doubt by her condition, and from want of air and exercise ; as the motion even of a carriage cannot be endured, and she has been confined to the house for the last six weeks.

The toucher discovers the uterus low

down in the cavity of the pelvis, and a soft velvety ulcer can be detected on the os, and extending along the anterior lip to the cervix uteri. The whole vagina is much relaxed, and the posterior wall is slightly prolapsed. The speculum discloses a very vascular ulcer, occupying the position stated, with small granulations, bleeding upon being touched. The introduction of the speculum was not attended with the slightest suffering, as the parts were so fully relaxed.

Considering that the previous abortion proceeded from the ulceration, I thought that the only means to prevent it would be to heal the surface ; feeling assured that the other symptoms of distress would vanish according as the uterus increased in bulk ; and, by rising out of the pelvis, cease to press upon the pelvic viscera. I therefore applied the solid nitrate of silver to the ulcer, and repeated it at the end of one week. I then substituted the solution of one drachm strength, and used it every



fourth day for six weeks ; by which time the ulcer completely healed, all symptoms of distress were greatly mitigated, and my patient was enabled to take walking exercise without any distress. The medicinal treatment was very trifling ; the bowels were relaxed by electuary of senna and sulphur ; and five-grain doses of ammonio-tartrate of iron were given three times a day. This, I may say, constituted the whole treatment.

This lady progressed favourably, and at the proper time was safely delivered.

My task is ended. In the preceding pages I have briefly described the different uses to which the speculum may be applied, and the various applications necessary to be used in the treatment of uterine diseases. It is needless to say that I have left many affections unnoticed, where this valuable instrument must be most beneficial ; but in a short treatise like the present, it would be impossible to do more than particularize the most common, and I may add, important ;

and should its perusal render the application of the speculum more easy, and the treatment of uterine affections more effectual, my purpose will be answered.

THE END.

